

Formality Review Claims Count Sheet

Case No. _____

Date: ____/____/____

As Filed			As Filed			As Filed			As Filed		
No.	Ind.	Dep.	No.	Ind.	Dep.	No.	Ind.	Dep.	No.	Ind.	Dep.
1	1		51		2	101			151		
2		1	52		2	102			152		
3		1	53		2	103			153		
4		1	54		2	104			154		
5		1	55		2	105			155		
6		1	56		2	106			156		
7		1	57		2	107			157		
8	1		58		2	108			158		
9		1	59		2	109			159		
10	1		60	1		110			160		
11		1	61		1	111			161		
12		1	62		1	112			162		
13		1	63			113			163		
14		1	64			114			164		
15		1	65			115			165		
16		1	66			116			166		
17		1	67			117			167		
18		1	68			118			168		
19		1	69			119			169		
20		1	70			120			170		
21		1	71			121			171		
22		1	72			122			172		
23		1	73			123			173		
24	1		74			124			174		
25		1	75			125			175		
26		1	76			126			176		
27		1	77			127			177		
28		1	78			128			178		
29		1	79			129			179		
30		1	80			130			180		
31	1		81			131			181		
32		1	82			132			182		
33		1	83			133			183		
34		1	84			134			184		
35		1	85			135			185		
36		1	86			136			186		
37		1	87			137			187		
38		1	88			138			188		
39		1	89			139			189		
40		1	90			140			190		
41		1	91			141			191		
42	1		92			142			192		
43		1	93			143			193		
44		1	94			144			194		
45	1		95			145			195		
46	1		96			146			196		
47		1	97			147			197		
48		2	98			148			198		
49		2	99			149			199		
50		2	100			150			200		
T. Ind.			T. Ind.	9		T. Ind.			T. Ind.		
T. Dep.			T. Dep.	65		T. Dep.			T. Dep.		
Total			Total	74		Total			Total		